



## Complete Summary

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### TITLE

Skin tumour pathology (biopsy book): percentage of patients for whom management lag time was less than 1 working day, greater than or equal to 1 working day and less than 5 working days, and greater than or equal to 5 working days and less than 2 weeks, during the 6 month time period.

### SOURCE(S)

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

## Measure Domain

### PRIMARY MEASURE DOMAIN

Access

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients for whom management lag time was less than 1 working day, greater than or equal to 1 working day and less than 5 working days, and greater than or equal to 5 working days and less than 2 weeks, during the 6 month time period.

### RATIONALE

Histopathology is performed to confirm a working/clinical diagnosis in inflammatory skin conditions and in skin tumours. In the case of tumours, histopathology may indicate adequate excision in the definitive treatment phase of management. The certainty and speed with which the results of histopathology

are reviewed in regard to management needs and passed on to the patient are indicators of quality.

## **PRIMARY CLINICAL COMPONENT**

Skin tumour; histopathology; management lag time

## **DENOMINATOR DESCRIPTION**

Total number of histopathology\* specimens taken, during the 6 month time period

\*Histopathology is the microscopic examination of a skin biopsy or excision.

## **NUMERATOR DESCRIPTION**

Total number of patients for whom management lag time\* was less than 1 working day, greater than or equal to 1 working day and less than 5 working days, and greater than or equal to 5 working days and less than 2 weeks, during the 6 month time period

\*Management lag time is the time elapsing between the report becoming available and necessary action being planned\*\*.

\*\*Necessary action being planned is defined as the documentation in the patients' notes of the management consequence of the histopathology result.

## **Evidence Supporting the Measure**

### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

## **Evidence Supporting Need for the Measure**

### **NEED FOR THE MEASURE**

Use of this measure to improve performance

### **EVIDENCE SUPPORTING NEED FOR THE MEASURE**

Australian Council on Healthcare Standards (ACHS). Australasian clinical indicator report 2001-2007. Determining the potential to improve quality of care: 9th edition. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2008. 611 p.

## **State of Use of the Measure**

### **STATE OF USE**

Current routine use

**CURRENT USE**

Internal quality improvement

**Application of Measure in its Current Use**

**CARE SETTING**

Hospitals

**PROFESSIONALS RESPONSIBLE FOR HEALTH CARE**

Physicians

**LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Group Clinical Practices

**TARGET POPULATION AGE**

Unspecified

**TARGET POPULATION GENDER**

Either male or female

**STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

**Characteristics of the Primary Clinical Component**

**INCIDENCE/PREVALENCE**

Unspecified

**ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

**BURDEN OF ILLNESS**

Unspecified

**UTILIZATION**

Unspecified

## **COSTS**

Unspecified

## **Institute of Medicine National Healthcare Quality Report Categories**

## **IOM CARE NEED**

Getting Better

## **IOM DOMAIN**

Effectiveness

Timeliness

## **Data Collection for the Measure**

## **CASE FINDING**

Users of care only

## **DESCRIPTION OF CASE FINDING**

Number of histopathology specimens taken, during the 6 month time period

## **DENOMINATOR SAMPLING FRAME**

Patients associated with provider

## **DENOMINATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Total number of histopathology\* specimens taken, during the 6 month time period

\*Histopathology is the microscopic examination of a skin biopsy or excision.

### **Exclusions**

Unspecified

## **RELATIONSHIP OF DENOMINATOR TO NUMERATOR**

All cases in the denominator are equally eligible to appear in the numerator

## **DENOMINATOR (INDEX) EVENT**

Diagnostic Evaluation

Encounter

## **DENOMINATOR TIME WINDOW**

Time window is a single point in time

## **NUMERATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Total number of patients for whom management lag time\* was less than 1 working day, greater than or equal to 1 working day and less than 5 working days, and greater than or equal to 5 working days and less than 2 weeks, during the 6 month time period

\*Management lag time is the time elapsing between the report becoming available and necessary action being planned\*\*.

\*\*Necessary action being planned is defined as the documentation in the patients' notes of the management consequence of the histopathology result.

### **Exclusions**

Unspecified

## **MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## **NUMERATOR TIME WINDOW**

Fixed time period

## **DATA SOURCE**

Administrative data  
Medical record

## **LEVEL OF DETERMINATION OF QUALITY**

Individual Case

## **PRE-EXISTING INSTRUMENT USED**

Unspecified

## **Computation of the Measure**

## **SCORING**

Frequency Distribution

## **INTERPRETATION OF SCORE**

Better quality is associated with a score falling within a defined interval

## **ALLOWANCE FOR PATIENT FACTORS**

Unspecified

## **STANDARD OF COMPARISON**

External comparison at a point in time  
External comparison of time trends  
Internal time comparison

## **Evaluation of Measure Properties**

## **EXTENT OF MEASURE TESTING**

Unspecified

## **Identifying Information**

## **ORIGINAL TITLE**

Indicator area 3: skin tumour pathology (biopsy book) CI 3.6 to CI 3.8.

## **MEASURE COLLECTION**

[Australian Council on Healthcare Standards \(ACHS\) Equip Clinical Indicators](#)

## **MEASURE SET NAME**

[Dermatology Indicators](#)

## **DEVELOPER**

Australian Council on Healthcare Standards

## **FUNDING SOURCE(S)**

Funding is direct Australian Council on Healthcare Standards (ACHS) funding sourced through our membership. ACHS does not receive external funding from the government or other sources.

## **COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE**

Our terms of reference dictate the composition of the working parties that develop our indicators and include the following:

- Two Clinicians -- nominated by the relevant specialty college/association/society, one nominated to be the chair of the working party
- Private Hospital Representative -- nominated by the Australian Private Hospital Association
- Consumer Representative -- nominated by the Consumer Health Forum of Australia
- Coding Representative -- nominated by the National Centre for Clinical classification on Health
- Quality Health New Zealand, nominated by QHNZ (if applicable)
- Epidemiological/Clinical Research Representative, Director of Health Services Research Group, University of Newcastle
- Australian Council on Healthcare Standards (ACHS) Representatives -- Clinical Director, Coordinator, Administrative Assistant
- Other Expert Stakeholders, as required

## **FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

None

## **ADAPTATION**

Measure was not adapted from another source.

## **RELEASE DATE**

1998 Jan

## **REVISION DATE**

2009 Jan

## **MEASURE STATUS**

This is the current release of the measure.

This measure updates a previous version: Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2008. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2007 Dec. 776 p.

## **SOURCE(S)**

Australian Council on Healthcare Standards (ACHS). ACHS clinical indicator users' manual 2009. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2009 Jan. 853 p.

## **MEASURE AVAILABILITY**

The individual measures, "Indicator Area 3: Skin Tumour Pathology (Biopsy Book) CI 3.6 to CI 3.8," are published in "ACHS Clinical Indicator Users' Manual 2009."

For more information contact, the Australian Council on Healthcare Standards (ACHS), 5 Macarthur Street, ULTIMO NSW 2007; Phone: (02) 9281 9955; Fax: (02) 9211 9633; E-mail: [pos@achs.org.au](mailto:pos@achs.org.au); Web site: [www.achs.org.au](http://www.achs.org.au).

## **COMPANION DOCUMENTS**

The following is available:

- Australian Council on Healthcare Standards (ACHS). Australasian clinical indicator report 2001-2007. Determining the potential to improve quality of care: 9th edition. ULTIMO NSW: Australian Council on Healthcare Standards (ACHS); 2008. 611 p. This document is available in Portable Document Format (PDF) from the [Australian Council on Healthcare Standards \(ACHS\) Web site](http://www.achs.org.au).

## **NQMC STATUS**

This NQMC summary was completed by ECRI Institute on January 8, 2009. This NQMC summary was updated by ECRI Institute on May 1, 2009.

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